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RURAL DISTRICT COUNCIL

—OF—

HARTSHORNE & SEALS.

Der

ANNUAL REPORT

OF THE

MEDICAL OFFICER OF HEALTH

For the Year 1911.

RODERIC LOGAN, M.R.C.S., ENG.,

Medical Officer of Health.

February, 1912.

Ashby-de-la-Zouch.

ASHBY-DE-LA-ZOUCH,

February, 1912.

TO THE RURAL DISTRICT COUNCIL OF HARTSHORNE & SEALS.

MR. CHAIRMAN AND GENTLEMEN.

I beg to present to you my Annual Report upon the Sanitary state of your District for the year 1911.

Tables of death, new cases of infectious disease, and Vital Statistics are appended, with tables of Inspector's work during the year.

The Vital Statistics are calculated per 1,000 persons living.

HARTSHORNE AND SEALS.

ANNUAL REPORT, 1911

GENERAL STATISTICS.

1. Elevation of District, 227 to 537 O.D.

GEOLOGY, Coal Measures and Clay, except Tickenhall
(Limestone).

AREA, Land 11,506 acres. Water 65 acres. Total 11,571 acres

	Census, 1901.	Census, 1911.	Estimated, 1911
Population ...	6988	7939	7963
Inhabited Houses	1470	1712	... ..

New Houses erected during the year, 16.

Rateable Value, £38,554. Assessable Value, £.....

General District Rate, 7d. in the £1.

VITAL STATISTICS.

Birth Rate.	General Death Rate.	Infantile Mortality.
30'2	11'05	116
Epidemic Diseases Death Rate.	Phthisis Death Rate.	
1'2	0'50	

Occupations. Mostly Coal Mining, Potteries and Agriculture.

£547 was expended in Outdoor Relief in the district.

Leicester, Derby and Burton Infirmaries are largely made use of throughout the district.

Water
supply.

In Woodville the Ashby and Swadlincote mains supply nearly every house. The rest are supplied from wells.

In Hartshorne the new supply from several wood springs has been laid on to the village, both to separate houses and to stand-pipes. The School has now a good supply from the mains.

Netherseal and Overseal are entirely dependent on wells. The quantity is fairly constant in both villages. In Overseal there has been no case of pollution found during the year, but in the Woodville road the quality is not good (ochreous). In Netherseal two wells have been found polluted, and both have been remedied.

In Smisby the water is from one spring, which supplies the whole village. It is satisfactory in quality and quantity.

In Tickenhall there is a good supply of water from upland springs running at three different places in the main street. This village is remarkably situated for a full, constant, and cheap supply of pure spring water. There are four points at which water can be obtained from the springs along the main street. Three are running springs and the fourth is a pump. One of the springs has been estimated to provide about 3,500 gallons per diem. The water could be supplied by gravitation alone to about nine-tenths of the village. A plan has been drawn up by your Inspector for the supply of this village, and is being considered by your Council. The water will be collected at the spring in Mr. Hill's garden and pumped into reservoir on the Hartshorne road, O.D.421, from where it will be distributed by gravitation throughout

the village. There are 50 houses without any supply within 100 yards, and there are 112 houses without a good supply within 100 yards.

Rivers and
Streams.

In Woodville there is no pollution.

In Hartshorne there is still pollution of the brook from sewage.

In Overseal the Hooborough brook is occasionally polluted from the neighbouring sewage outfall works.

In Netherseal the brook receives some sewage, but this is much diluted.

In Tickenhall there is practically no pollution of any river or stream beyond the limepits.

In all cases sewage is slop water only.

Drainage
and
Sewerage.

In Woodville the old contact beds are not effecting sufficient purification, partly in consequence of increased population. They should be replaced by percolating filters of larger area. The storm water is mixed with the sewage dealt with.

In Hartshorne there is no sewerage system, and one is certainly required. Now that the water supply is laid on the sewers can be flushed.

In Overseal there has been an extension of the main sewer on the Woodville Road. There are three outfalls provided to deal with the sewage. One in Nixon's field is a cesspit with irrigation of the overflow over grass land. The second is at Shorth Heath, and consists of a precipitation tank with distribution of the liquid over a filter bed by a fixed branch distributor. The same arrangement is also provided at Woodville Road, but here the fall is so small that it is impossible to get a good effluent, and complaints have been made of nuisance arising in hot weather from this outfall. The levels, the brook (Hooborough brook), and the adjacent canal, make it very difficult to deal with this outfall, though in consequence of the close proximity of the new Council School and an

increasing population it is the most important section of the village system. The sewerage of this village is complete and satisfactory.

In Netherseal a new sewer has been laid down Dog Lane to prevent the pollution of the brook. The sewage is treated in settling tanks, the effluent passing down open ditches to the brook.

In Tickenhall the main portion of the sewage passes into the culvert which underlies the main street. It is greatly diluted by the large quantity of spring water and surface water which runs down this culvert, and finally passes into Dexter's Pool (the lime pits) to be still more diluted. House drains are, in a good many instances, defective, though repairs to these have been carried out in some instances during the past year. The village requires sewerage.

In Smisby the sewerage is in good order. The sewage is dealt with in a precipitating tank, and the overflow percolates for a considerable distance in an open ditch before reaching any brook course.

Throughout the district—with the single exception of Woodville—the sewage to be dealt with is entirely slop water. The sewage and storm water are conveyed together.

Hartshorne and Tickenhall are the parishes most urgently requiring attention under this heading.

Excrement Disposal.	P. Middens.	Pail Closets.	W.Cs.	Slop Water Closets.
Nearly the whole district.		30	105	6

2 P. Middens have been converted to W.Cs.

14 defective privies and closets improved.

No houses converted from pail closet to water closet.

The excrement disposal is, in the case of Woodville and Overseal, carried out by contractors under the

Council. In Woodville it is efficiently done—in Overseal there are often complaints.

In the rest of the district it is carried out by the occupiers.

By the contractors the privy middens and ashpits are emptied every three months—pan closets and dustbins weekly. In the rest of the district the privy middens and ashpits are emptied when they are overfull.

The cost of scavenging per house per annum in Woodville is about 4s. 4d. (96 W.Cs.), in Overseal is about 4s. 1d. (no W.Cs.)

Disposal of
House
Refuse.

This is, in the case of Woodville and Overseal, removed by the contractors and distributed over the land or in special “tips.”

In the rest of the district it is dealt with by the occupiers, who usually get a neighbouring farmer to remove it.

Schools—
Public Ele-
mentary.

In Woodville the Council School is a large, many-roomed building, converted to school uses from a chapel. It is situated in the main street. The lighting is bad in some of the rooms. The windows are not often enough cleaned. The ventilation is satisfactory. One classroom shows damp. The sanitary arrangements and water supply are satisfactory.

In the Church School the lighting of the main room (infants' department) is not very good in winter. In the mixed department the lighting is poor. There is no cross ventilation in the main room. The sanitary arrangements and water supply are satisfactory.

Hartshorne.

The ventilation is defective—the rooms being stuffy with closed and draughty with open windows. The new water supply is laid on to this School, and the sanitary arrangements are now satisfactory.

Overseal.

The Church School.—The lighting and ventilation are satisfactory. The closets are P. Middens. The water supply is from a pump (rain water) for lavatory purposes, and from the Schoolhouse well for drinking.

Overseal Council School is a new school, and is satisfactory in all respects.

Netherseal Church School is insufficiently lighted, and the ventilation is unsatisfactory. The privy midden closets and urinal are much too close to the building. There is no water supply on the premises.

Tickenhall
Church
School.

The lighting is defective in one classroom, and the ventilation is not satisfactory. There is no water supply except the Schoolhouse well, which is liable to pollution. The closets have been removed much further from the School recently, and are satisfactory. They are privy midden and pail closets.

Smisby Council School is a new school, and is satisfactory in all respects.

Infections
Disease.
Scarlet
Fever.

After notification—notice is at once sent to the Headmaster of the Elementary School and the Superintendent of the Sunday School. The infected premises are visited as a rule within 24 hours. Where it is advisable to remove a case to the Isolation Hospital, such removal is carried out usually within 24 hours of the first visit. Schoolmasters are notified not to admit any child from the infected house until two weeks have elapsed after the house has been declared free from infection, or where cases have been removed—for two weeks after the return home of the patient. The houses are disinfected with Sulphur Dioxide fumigation or Formalin Spray by the Sanitary Inspector personally. Such disinfection is done immediately after removal of the case, or after patient is declared free from the disease.

Sanitary
Inspection.

The work of the Sanitary Inspector is shown in detail in the table at end of this report.

There are no lodging houses, cellar dwellings, or offensive trades.

Food Supply. The milk used in the district is entirely produced within the district.

No case of tuberculous udder has been reported.

There are 59 cow-keepers on the register, and 700 cows are kept approximately.

There are two dairies where cows are not kept.

	No. of Registered.	Inspections made.	Defects found.	Remedied.
Cowhouses	59	96	22	22
Dairies ... }	2	.....	.....	.....
Milkshops }				

Slaughterhouses are regularly visited, and the meat prepared for sale inspected. No other special arrangements for inspection of meat have been found necessary.

The condition of the slaughterhouses and bake-houses has been satisfactory.

No action has been taken under Sec. 117 of the Public Health Act, 1875.

No carcasses or parts of carcasses have been condemned for tuberculosis.

Housing. 61 houses have been inspected under the Act of 1909. None were found unfit for human habitation, but 7 representations were made to your authority for closing orders. No closing orders have so far been made.

In 14 cases the defects found have been already remedied, and in 31 others the defects are being remedied.

The defects found are usually bad ventilation, defective paving, and damp.

Defective water supply, closet accommodation, drainage and washing facilities are also found, and absence of coal houses has been noted in several cases.

There is usually ample open space about the houses.

Supervision over erection of new houses is carried out by your Surveyor.

Factories &
Workshops

There are 7 factories and 43 workshops and workplaces.

Three cases of want of cleanliness and one of overcrowding have been noted and remedied. One notice under the Public Health Act has been received from H.M. Inspector, and one report of action taken been sent to him. There are no out-workers.

Sanitary
Adminis-
tration.

The present Isolation Hospital for infectious diseases, at Swannington, is not sufficient to deal with the requirements of this district and the Ashby Rural. In my last annual report I stated that a Joint Hospital scheme was under consideration. An enquiry has been held by the Leicestershire County Council. Your Council have agreed to join the scheme by paying for each patient admitted to the Joint Hospital on terms to be agreed. The Ashby-de-la-Zouch Urban District, the Ashby Rural District, and the Ashby Woulds Urban District Councils have agreed to join the scheme, and I believe that another district in the neighbourhood has expressed its desire to be included, and the scheme is now awaiting decision as to their inclusion.

Tuberculosis

There is no accommodation at present provided for cases of Pulmonary Tuberculosis. The County Medical Officer has prepared a scheme for dealing with this disease to meet the requirements of the order of the Local Government Board, and a conference of representatives of the District Councils has been held to hear the outlines of the scheme. Another conference is to be held. In dealing with tuberculosis it is very necessary that a comprehensive plan should

be carried out, such as this scheme of the County Medical Officer. Health visitors, in my opinion, should be trained nurses, and would be invaluable for teaching the poorer classes (amongst whom tuberculosis of the lungs is so prevalent) the dangers of the disease, and the requirements in dealing with it of food, dress, ventilation, habits of life, use of outdoor shelters, and so on.

Cases who are at work should be encouraged, if advisable, to continue at work. For these cases the tuberculin dispensary for administration of the tuberculin treatment should be provided. I suggest the use of existing Cottage Hospitals for such purposes, at any rate as a commencement.

Advanced cases of disease who are unfit for Sanatorium treatment should be segregated in special hospitals for such cases. Present Isolation Hospitals, such as the one at Swannington, which are no longer suitable or large enough for ordinary infectious cases might be made use of for this purpose with necessary alterations or extension.

Sanatoria for the treatment and cure of early cases of the disease will also be necessary. These will at any rate partly be provided by the provisions of the Insurance Act.

These are the minimum requirements in dealing effectively with pulmonary tuberculosis or consumption, and it is apparent that they cannot all be carried out by separate districts or even a combination of districts so effectively and so economically as by the County Sanitary Authority: though the control of details will be in the hands of the Local Sanitary Authorities.

I strongly advocate the provision of open air shelters for certain cases of consumption. They are often found in small houses where one room for the patient alone is an impossibility, where the patient is too ill for tuberculin treatment or for Sanatorium

treatment or for removal from home. They should be provided at either a very small weekly rent, not more than a shilling in agricultural districts, or free of charge. I have already noted a willingness to use such shelters in cases visited by me if the shelter could be obtained.

I beg therefore to suggest to your Council the careful consideration of these points which are mainly taken from Dr. Barwise's special report on tuberculosis and included in his scheme, as your Council will no doubt be represented at the next conference at Derby. The prevention of the spread of tuberculosis is the most important sanitary necessity of the day. In my opinion it is the most expensive, the most infectious, and the most fatal disease of the race.

Acute
Infectious
Disease.

During the year eleven cases of Diphtheria have been notified, and Antitoxin has been supplied free of charge to seven cases. Only one death was caused by this disease. Seven of the cases occurred in Overseal, two in Tickenhall, and two in Netherseal. I visited the Schools in Overseal and Tickenhall and took swabs of the throat in two suspicious cases, but neither gave positive proof of the Locffler Bacillus.

28 cases of Scarlet fever were notified. This disease has been prevalent throughout the year. In January there was an outbreak at Netherseal, where 15 cases occurred, and 12 were removed to the hospital. The school was visited three times, and all the children inspected who were present; no single case was found. There is no doubt, as I reported at the time, that the disease was spread by intercommunication between families, and it was found impossible to prevent this in spite of personal visits and the most careful advice and warnings. The school was not closed, but was cleansed and disinfected in the Easter holidays. 8 cases have been notified from Overseal, of which 5 were removed to hospital. There has been no death from scarlet fever.

8 cases of erysipelas have also been notified.

No case of phthisis was notified under either the Hospital or the Poor Law regulations. The number of deaths from phthisis is 4, and the death rate is 0.50 per 1000 of the population.

The County Analyst examines and reports upon cases of diphtheria and phthisis and tuberculous meat, and medical officers are provided with means for sending the necessary matters safely and promptly to his laboratory, by the County Council.

With regard to non-notifiable diseases there was a severe outbreak of measles in Woodville in the early part of the year nearly every child in the schools who had not previously had the disease was infected. An attempt was made to check the spread by closing certain classes in the Infant School but infection was already widespread before any means could be taken to deal with it. There had not previously been an epidemic of measles in this parish for some years.

	Small Pox	Scarlet Fever	Diphtheria	Enteric Fever	Puerperal Fever	Erysipelas
No. of cases notified		28	11			8
Do. removed to Hospital ...		18				
No. of cases which ought to have been removed, but could not owing to lack of accommodation		2				
Return Cases ...		1				

Infant
Mortality.

The number of deaths of children under 1 year of age is 28, and the infant mortality rate is 116 per 1000 births.

The Notification of Births' Act has not been adopted.

A special report upon the outbreak of scarlet fever in Netherseal was made in January.

The Vital Statistics of the District are appended in four tables as required by the Local Government Board.

The adoption of certain sections of the Public Health Act Amendment Act, 1907, is receiving consideration by your Council.

In conclusion, I beg to suggest the Water Supply of Tickenhall, and the sewerage and sewage treatment of Hartshorne, as the most necessary requirements of the district. The former is, I am aware, already under consideration by your Council and a detailed plan has been prepared and presented by your Inspector.

I am, Gentlemen,

Your obedient Servant,

RODERIC LOGAN,

Med. Officer of Health.

Annual Report of Sanitary Inspector.

Under Article XX. (16) Sanitary Officers' (outside London) Order 1910.

—1911.—

HARTSHORNE AND SEALS RURAL SANITARY DISTRICT

NAME OF INSPECTOR, NORMAN F. SPENCE.

Area of District—11,571 acres. Estimated No. of Houses—1729.

New Houses erected 1911—16.

	Informal Notices Served by Sanitary Inspector.	Legal Notices Served by Local Authority.	Nuisance Abated
DWELLING HOUSES—			
Repaired	46	—	46
Closed as Unfit for Habitation ...	—	—	—
Infected Houses Disinfected ...	34	—	—
DRAINAGE—			
No Disconnection of Waste Pipe	—	—	—
Defective Traps, Inlets and Drains	27	—	27
Drains Obstructed	4	—	4
CLOSETS AND ASHPITS—			
Insanitary Privies and Ashpits ...	14	—	14
Insufficient Closet Accommodation	1	—	1
Conversion of Privies into W.C.'s	2	—	2
Defective Water Closets	3	—	3
OTHER DEFECTS—			
Surfaces of Courts and Yards ...	5	—	5
Eaves-Spouts and Down-Spouts ...	6	—	6
Urinals Defective	—	—	—
Water Supply	15	—	15
Offensive Accumulations	50	—	49
Animals improperly kept	2	—	2
Pigsties	2	—	2
Smoke Nuisances	—	—	—
Overcrowding	1	—	1
Foul Condition of Houses... ..	1	—	1
Totals	213	—	175
	Number on Register.	Inspections Made.	Notices Served.
Dairies, Cowsheds, and Milkshops ...	61	96	22
Bakehouses	14	18	2
Slaughterhouses	19	36	3
Offensive Trades... ..	—	—	—
Common Lodging-houses	—	—	—
Totals	—	150	27

Method of Disinfection after Infectious Disease—Sulphur or Formalin.

Samples of Water submitted for Analysis—4.

Other Action taken.

Signed, N. F. SPENCE.

TABLE I.

Vital Statistics of Whole District during 1911 and previous Years.

YEAR.	Population esti- mated to Middle of each Year.	BIRTHS.			TOTAL DEATHS REGISTERED IN THE DISTRICT		TRANSFER- ABLE DEATHS of Non-residents registered in the District. of Residents not registered in the District.		NETT DEATHS BELONGING TO THE DISTRICT.			
		Uncorrected Number.	Nett.						Under 1 Year of Age.		At all Ages.	
			Number.	Rate.	Number.	Rate.	Number.	Rate per 1000 Nett Births.	Number.	Rate.		
1	2	3	4	5	6	7	8	9	10	11	12	13
1906	7696		215	37·8	84	10·7		2	23	106	86	11·1
1907	7843		237	30·0	88	11·1		2	20	84	90	11·4
1908	7979		246	30·7	105	13·1		5	26	105	110	13·8
1909	8089		208	25·6	96	11·8		2	28	135	98	12·06
1910	8243	236	236	28·6	81	9·7		1	22	93	82	9·9
1911	7963	238	241	30·2	88	11·05		12	28	116	100	12·5

Area of District in acres (exclusive of area covered by water)—11506

Total population at all ages	7963	} At Census of 1911.
Number of inhabited houses ...	...	...	...	1712
Average number of persons per house	...	...	...	4·6

TABLE II.

Cases of Infectious Disease notified during the Year 1911.

NOTIFIABLE DISEASE.	NUMBER OF CASES NOTIFIED.										TOTAL CASES NOTIFIED IN EACH LOCALITY. (e.g. Parish or Ward) of the District.						
	At all Ages.	At Ages—Years.						1	2	3	4	5	6	7			
		Under 1.	1 to 5.	5 to 15.	15 to 25.	25 to 45.	45 to 65.								65 and upwards.		
Small-pox																	
Cholera																	
Diphtheria (including Membranous group)	11	1	1	8		1											
Erysipelas	8			1	5	1											
Scarlet Fever	28		9	18		1											
Typhus Fever																	
Enteric Fever																	
Relapsing Fever																	
Continued Fever																	
Puerperal Fever																	
Plague																	
{ Under Tuberculosis Re-																	
gulations, 1908																	
Phthisis { Under Tuberculosis Re-																	
gulations, 1911																	
Others																	
Totals	47	1	10	27	5	3								18			

Isolation Hospital, Name and Situation—Swannington.

Total available Beds—8.

Number of Diseases that can be concurrently treated—2.

TABLE III.

Causes of, and Ages at Death during the Year 1911.

CAUSES OF DEATH.	NETT DEATHS AT THE SUBJOINED AGES OF "RESIDENTS" WHETHER OCCURRING WITHIN OR WITHOUT THE DISTRICT.										TOTAL DEATHS WHETHER OF "RESIDENTS" OR "NON-RESIDENTS" IN INSTITUTIONS IN THE DISTRICT.
	All Ages	Under 1 year.	1 & under 2 years.	2 & under 5 years.	5 & under 15 years.	15 & under 25 years.	25 & under 45 years.	45 & under 65 years.	65 and upwards.		
1	2	3	4	5	6	7	8	9	10	11	
All causes { Certified ... { Uncertified ...	2						1	1			
Enteric Fever											
Small Pox											
Measles											
Scarlet Fever											
Whooping Cough	9	5	1	3							
Diphtheria and Croup	1				1						
Influenza	1						1				
Erysipelas											
Cerebro-Spinal Fever											
Acute Ant. Poliomyelitis	1				1						
Phthisis (Pulmonary Tuberculosis)	4				1		1	2			
Tuberculous Meningitis											
Other Tuberculous Diseases	1						1				
Rheumatic Fever	2					1	1				
Cancer, malignant disease	5							1	4		
Bronchitis	10	1		1				3	5		
Broncho-Pneumonia	1	1									
Pneumonia (all other forms)											
Other diseases of Respiratory Organs... ..											
Diarrhoea and Enteritis	8	6		1		1					
Appendicitis and Typhlitis	1					1					
Alcoholism											
Cirrhosis of Liver	1							1			
Nephritis and Bright's Disease	3			1				1	1		
Puerperal Fever											
Other accidents and diseases of Pregnancy and Parturition	1	1									
Congenital Debility and Malformation, including Premature Birth	9	9									
Violent Deaths, excluding Suicide	2			1			1				
Suicides	1						1				
Other Defined Diseases	39	5			1		6	4	23		
Diseases ill-defined or unknown..											
	100	28	1	7	4	3	12	12	33		

TABLE IV.
Infant Mortality.

1911. Nett Deaths from stated causes at various Ages under 1 Year of Age.

CAUSE OF DEATH.		Under 1 week	1-2 weeks.	2-3 weeks.	3-4 weeks.	Total under 1 month.	1-3 months.	3-6 months.	6-9 months.	9-12 months.	Total deaths under 1 year.
All causes	{ Certified ... Uncertified	9	1	3		13	6	5	2	2	28
Small-pox											
Chicken-pox											
Measles											
Scarlet Fever											
Diphtheria and Croup											
Whooping Cough							2	3			5
Diarrhoea							1				1
Enteritis											
Tuberculous Meningitis											
Abdominal Tuberculosis...											
Other Tuberculous Diseases											
Congenital Malformations		1				1					1
Premature Birth		5	1			6					6
Athrophy, Debility and Marasmus		3		2		5	1				6
Atelectasis											
Injury at Birth											
Erysipelas											
Syphilis											
Rickets										1	1
Meningitis (<i>not Tuberculous</i>)											
Convulsions											
Gastritis							1	1	2	1	5
Laryngitis											
Bronchitis				1		1					1
Pneumonia (all forms)							1				1
Suffocation, overlying											
Other causes								1			1
		9	1	3		13	6	5	2	2	28
Nett Births in the year { legitimate—238. illegitimate—3.		Nett Deaths { legitimate infants—28. in the year of { illegitimate infants.....									

In recording the facts under the various headings of Tables I., II., III. and IV., attention has been given to the notes on the Tables.

R. LOGAN,
Medical Officer of Health.

March, 1912.

